Instructor Room Change Request Form

Today’s Date: _____________________   Term: _____________________

Instructor’s Name: ___________________________     Department: ________________________

Instructor Contact Number/Email: ______________________________________________________

Reason for Change:

☐ Need Blackboard/WhiteBoard (Please Circle One)
☐ Need Computer Lab
☐ Need Classroom
☐ Room is to Small for Class Size
☐ Classes Back to Back
☐ Other __________________________________________________________________________

<table>
<thead>
<tr>
<th>Course &amp; Section</th>
<th>Current Room</th>
<th>Day(s)</th>
<th>Start Time</th>
<th>End Time</th>
<th># of Students</th>
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Requestor’s Signature: __________________________________________________________________

Registrar’s Office Use Only

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<tr>
<th>Course &amp; Section</th>
<th>Old Room</th>
<th>New Room</th>
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<tbody>
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☐ Sign   ☐ E-Mail   ☐ System

☐ We are unable to reserve room(s) for the dates and times listed above.

Please drop this form at the Registrar’s Office S315 for processing.
If you have any questions please contact Kin Kong at ext 1296 or kkong@bmcc.cuny.edu